



**Seattle
Structural
Integration
Training
Application**



Personal Information

Name

Address

City State/Province Postal Code Country

Home phone Office Phone Cell phone

Email address Website Address

Class Interest

Which KMI training do you wish to attend? Please fill in the following details.

<i>Check all that apply</i>	Location	Year
Part I: Structural Vision		
Part II: Structural Strategies		
Part III: Structural Integration		

Attending an Anatomy Trains® workshop is a prerequisite for this training. Which Anatomy Trains workshop did you attend?

Location			
Dates			

Have you attended any other workshop sponsored by Kinesis/Tom Myers in the past?
If so, please complete below.

Dates			
Title			
Location			
Instructor			

Name

Please complete the following, If you need additional space, use a separate sheet of paper.

Please be specific and detailed.

What is your academic background? You will need to submit copies of certificates/diplomas. List degrees or certifications earned, name of school, and date of graduation. Include both academic and professional education. Be sure to list any state or national credentials you currently hold.

What is your current occupation and/or practice specialty? Please give a general account of your work history, particularly manual or movement training. Also include average number of clients per week and years in practice.

Personal Interests? So that we may get to know you better, please give us a brief summary of your hobbies and personal interests.

Why do you wish to learn Structural Integration through KMI? Please discuss your reason for enrolling in this training program and what you hope to gain from it.

Legal Infractions? Have you ever been charged or convicted of a crime – or plead guilty or no contest to a crime (other than minor traffic offenses)? List dates and details.

Name _____

Health

Please let us know if there are any specific physical health issues that we should be aware of (check all that apply and make special notes if necessary; useful for emergency hospitalization)

Allergies	
High/Low Blood pressure	
Skin Conditions	
Spinal/Skeletal Problems	
Heart Conditions	
Neurological Problems	
Diabetes	
Diagnosed psychological or emotional conditions	
Medication (in case of emergency hospitalization)	

You will receive certificates of attendance for both Parts I and II. Upon completion of Part III, you will receive a certificate of completion. **How should your name appear on the certificates?**

Emergency Contact Information

Who should we contact?

Name	Relationship	State of residence
Home phone	Office phone	Cell phone

Please return **this application** with the following to Therapeutic Training Center at the address below. Note: We cannot accept faxed applications.

- Photo (an informal or professional 4x6 head shot of yourself)
- Copies of educational certificates showing licensure or certification (attendance certificates are not necessary)
- \$500 deposit (checks payable to **Therapeutic Training Center**. Call 206 853-6875 to pay by credit card)

**Therapeutic Training Center
PO Box 66864
Seattle, WA 98166**

<i>Office use only</i>							
AT		Deposit	\$	Tuition	\$	Lodging	
Where		FOP		FOP		Phone	
Dates		Date		Date		Arrival	
Teacher				PP		Departure	

KMI Registration Guidelines

- Acceptance into this program is entirely at the discretion of Kinesis
- All applications must be submitted with photo, certificates and deposit in order to be considered
- All parts must be taken in sequential order. In addition, there are the following prerequisites for each part:
 - Part 1:** Prior attendance at an Anatomy Trains workshop
 - Part 2:** Three years practical experience in manual therapy after graduation from a recognized training program (exceptions are possible, but must be discussed with Kinesis well in advance)
 - Part 3:** Documented receipt of a Structural Integration series (KMI, Rolfing®, Hellerwork®, or the like)
- Part 1 or Parts 1 and 2 may be taken on their own by qualified persons for personal or professional development Preference is given to students enrolled in all three parts
- Minimum enrollment numbers must be met in order for any course to commence as scheduled. Please refrain from securing travel arrangements until such announcement is made – usually no less than 8 weeks prior to class start dates.
- Tuition policy and Payment Plan are available via the Kinesis (www.Anatomy-Trains.com) and the Therapeutic Training Center (www.TheraTraining.com) websites or by request through either office. If you have any questions or concerns about the policy please contact Kinesis to discuss it prior to submitting your application and deposit. Tuition is due in full one week prior to the first day of class. If you desire, a payment plan is available which will extend the tuition throughout the course of the training. You will be required to sign a form agreeing to credit card charges in specific amounts for scheduled dates

Office contacts:

Kinesis, Inc.
318 Clarks Cove Road
Walpole, ME 04573
207 563-7123
iworkshops@anatomytrains.com

Therapeutic Training Center
4500 9th Ave NE, Ste 324
Seattle, WA 98105
206 853-6875
info@theratraining.com